



DISCLOSURE 2A, PART 2 – ENTITY: ADDITIONAL OWNERSHIP INTERESTS

Refer to the Application Instruction Booklet for instructions on how to complete this form at: www.michigan.gov/mmfl

Entity Name

Use related addendum if additional pages are necessary.

A PREQUALIFICATION APPLICATION must be completed for each ownership interest, if the person exercises control over or participates in the management of the company.

Please disclose additional ownership and indicate the person's role in the entity as follows:

1. For a limited partnership and limited liability limited partnership – All limited partners holding a direct or indirect ownership interest of 10% or less and their spouses.
2. For a limited liability company – All members holding a direct or indirect ownership interest of 10% or less and their spouses.

Individual or Entity Name	Title (if applicable)	Percentage of Interest	SSN/FEIN
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Spouse Name (if applicable)	Address		SSN
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Role and/or Responsibility in the Entity

Individual or Entity Name	Title (if applicable)	Percentage of Interest	SSN/FEIN
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Spouse Name (if applicable)	Address		SSN
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Role and/or Responsibility in the Entity

Individual or Entity Name	Title (if applicable)	Percentage of Interest	SSN/FEIN
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Spouse Name (if applicable)	Address		SSN
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Role and/or Responsibility in the Entity

Individual or Entity Name	Title (if applicable)	Percentage of Interest	SSN/FEIN
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Spouse Name (if applicable)	Address		SSN
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Role and/or Responsibility in the Entity

NOTE: The Marijuana Regulatory Agency may require additional individuals to submit personal disclosure forms based on information contained in this application or otherwise disclosed during the background investigation.